



TTW

Docket No.: M4065.0369/P369-A
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shane J. Trapp

Application No.: 10/006,704

Confirmation No.: 3229

Filed: December 10, 2001

Art Unit: 1765

For: METHOD AND COMPOSITION FOR
PLASMA ETCHING OF A SELF-ALIGNED
CONTACT OPENING

Examiner: L. T. Umez Eronini

RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated December 13, 2006, please reconsider the above-identified U.S. patent application as follows:

A Listing of the Claims begins on page 2 of this paper.

Remarks begin on page 4 of this paper.



AMENDMENT TRANSMITTAL LETTER				Docket No. M4065.0369/P369-A																																					
Application No. 10/006,704-Conf. #3229		Filing Date December 10, 2001		Examiner E. L. T. Umez																																					
Art Unit 1765																																									
Applicant(s): Shane J. Trapp																																									
Invention: METHOD AND COMPOSITION FOR PLASMA ETCHING OF A SELF-ALIGNED CONTACT OPENING																																									
TO THE COMMISSIONER FOR PATENTS																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
CLAIMS AS AMENDED																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding: 2px;"></th> <th style="text-align: center; padding: 2px;">Claims Remaining After Amendment</th> <th style="text-align: center; padding: 2px;">Highest Number Previously Paid</th> <th style="text-align: center; padding: 2px;">Number Extra Claims Present</th> <th style="text-align: center; padding: 2px;">Rate</th> <th style="text-align: center; padding: 2px;"></th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Total Claims</td> <td style="text-align: center; padding: 2px;">7</td> <td style="text-align: center; padding: 2px;">- 40 =</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">x 50.00</td> <td style="text-align: center; padding: 2px;">0.00</td> </tr> <tr> <td style="padding: 2px;">Independent Claims</td> <td style="text-align: center; padding: 2px;">3</td> <td style="text-align: center; padding: 2px;">- 6 =</td> <td style="text-align: center; padding: 2px;">0</td> <td style="text-align: center; padding: 2px;">x 200.00</td> <td style="text-align: center; padding: 2px;">0.00</td> </tr> <tr> <td colspan="5" style="padding: 2px;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td style="padding: 2px;"></td> </tr> <tr> <td colspan="5" style="padding: 2px;">Other fee (please specify):</td> <td style="padding: 2px;"></td> </tr> <tr> <td colspan="5" style="padding: 2px;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td style="text-align: center; padding: 2px;">0.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	7	- 40 =	0	x 50.00	0.00	Independent Claims	3	- 6 =	0	x 200.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
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TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00																																				
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																						
<input checked="" type="checkbox"/> No additional fee is required for this amendment.																																									
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.																																									
<input checked="" type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
 Thomas J. D'Amico Attorney/Agent Reg. No.: 28,371																																									
Dated: <u>March 9, 2007</u>																																									
DICKSTEIN SHAPIRO LLP 1825 Eye Street, NW Washington, DC 20006-5403 (202) 420-2232																																									